

## DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare: that my residence, post office address and citizenship are as stated below next to my name; that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Asymmetric Digital Subscriber  
Line Telephone Filter

the specification of which (check only one item below):

☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as  
United States application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

☐ was filed on \_\_\_\_\_ as  
PCT international application No. \_\_\_\_\_  
and was amended under PCT Article 19 on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified application, including the claim(s), as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with the Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

### Prior Foreign Application(s)

### Priority Claimed

(Number) _____	(Country) _____	(Month/Day/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number) _____	(Country) _____	(Month/Day/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number) _____	(Country) _____	(Month/Day/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number) _____	(Country) _____	(Month/Day/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number) _____	(Country) _____	(Month/Day/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.) _____	(Filing Date) _____	(Status)(patented, pending, abandoned) _____
(Application Serial No.) _____	(Filing Date) _____	(Status)(patented, pending, abandoned) _____

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

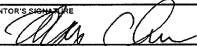
(Application Serial No.) _____	(Filing Date) _____
(Application Serial No.) _____	(Filing Date) _____

VARDELL & VARDELL, PLLC  
(formerly VardeLL Legal Group)

I hereby appoint as principal attorney R. Eugene VardeLL, Jr., Reg. No. 29,728. Please direct all communications to the following address:

VARDELL & VARDELL, PLLC  
SUITE 220  
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ALEXANDRIA, VA 22314  
(703) 683-9730

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME(S) Max Chu	FAMILY NAME	INVENTOR'S SIGNATURE 	DATE March 21, 2001
RESIDENCE (City, State & Country) 4F., No. 126, Hsing Yun Street, Na Fu District, Taipei, Taiwan, R.O.C.			CITIZENSHIP R.O.C.
POST OFFICE ADDRESS (Complete Street Address including City, State & Country) same as above			
GIVEN NAME(S)	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City, State & Country)			CITIZENSHIP
POST OFFICE ADDRESS (Complete Street Address including City, State & Country)			
GIVEN NAME(S)	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
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GIVEN NAME(S)	FAMILY NAME	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City, State & Country)			CITIZENSHIP
POST OFFICE ADDRESS (Complete Street Address including City, State & Country)			

☐ Similar information and signature for sixth and subsequent joint inventors on attached sheet.